## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000046459

Entity Name: EL CAPRICHO NURSERY, INC.

FILED May 01, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

16475 SW 248 STREET MIAMI, FL 33031 US

Current Mailing Address: New Mailing Address:

16475 SW 248 STREET 17220 SW 77 COURT

MIAMI, FL 33031 US PALMETTO BAY, FL 33157 US

FEI Number: 26-2597231 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEONARDO, JOSE J ESQ.

12515 N. KENDALL DRIVE

SUITE 222

MIAMI, FL 33186 US

MANUEL, MENDOZA-CARDEN

17220 SW 77 COURT

PALMETTO BAY, FL 33157 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MANUEL MENDOZA-CARDENAL 05/01/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 MENDOZA, ROXANA
 Name:
 MENDOZA, ROXANA

 Address:
 16475 SW 248 STREET
 Address:
 17220 SW 77 COURT

 City-St-Zip:
 MIAMI, FL 33031 US
 City-St-Zip:
 PALMETTO BAY, FL 33157 US

Title: S/T () Delete Title: S/T (X) Change () Addition Name: MENDOZA-CARDENAL, MANUEL Address: 16475 SW 248 STREET Address: 17220 SW 77 COURT

City-St-Zip: MIAMI, FL 33031 US City-St-Zip: PALMETTO BAY, FL 33157 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROXANA MENDOZA PRES 05/01/2009

Electronic Signature of Signing Officer or Director

Date